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Substitute for form 1449/PTO	Complete if Known			
	Application Number	Applied For		
INFORMATION DISCLOSURE	Filing Date	Herewith		
	First Named Inventor	Kieren, Joseph R.		
STATEMENT BY APPLICANT	Art Unit			
(Use as many sheets as necessary)	Examiner Name			
eet of 2	Attorney Docket Number	SBC 0133 PA (P00300)		

Examiner Initials*	Cite No.	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant	
		Number-Kind Code ^{2 (# known)}		, pp. 6. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.	Figures Appear	
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		FORE	IGN PATENT DOCU	MENTS		
	Cite No.1	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	
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Examiner Signature	Durnh H. Ngruyen	Date Considered 8/2/06	•

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Substitute for	Form 1449B/P1	ro		Compl	ete if Known			
INFORMATION DISCLOSURE STATEMENT BY APPLICANT			Application	Application Number Unassigned				
			Filing Date		Herewith			
			First Name	d Inventor	Joseph Kieren			
				Group Art I	Jnit			
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Sheet	Sheet 2 of 2			Attorney D	Attorney Docket Number SBS 0133 PA (P00300)			
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